# Medicaid Adult Expansion Bridge Plan Report



September 17, 2019

# Expansion Enrollment by Subgroup

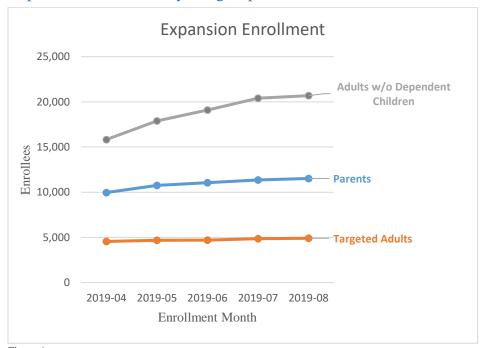


Figure 1
Expansion Enrollment

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Category	2019-04	2019-05	2019-06	2019-07	2019-08
Parents	9,966	10,748	11,063	11,359	11,524
Targeted Adults	4,553	4,682	4,697	4,865	4,905
Adults w/o Dependent Children	15,829	17,895	19,104	20,410	20,687
Total	30,348	33,325	34,864	36,634	37,116

Table 1

#### **Notes:**

Enrollment as of September 17, 2019. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage.

# **Expansion Demographics**

Last update: July 2019

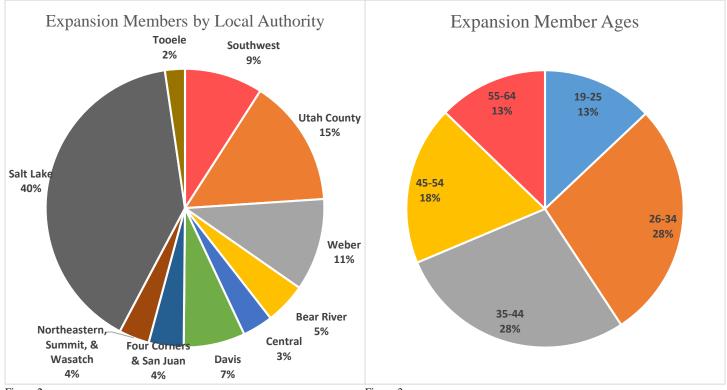


Figure 2 Figure 3

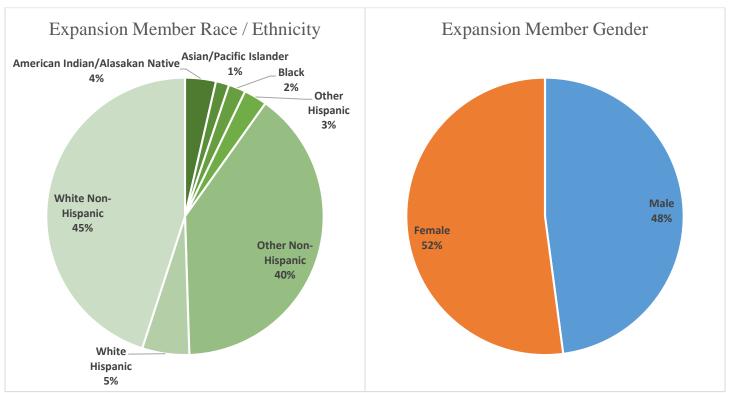


Figure 4 Figure 5

## Targeted Adult Medicaid (TAM) Enrollment by Subgroup

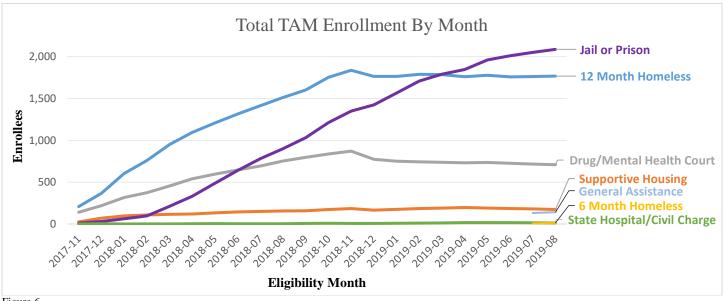


Figure 6

## TAM Enrollment by Month

#### FY18

TAM Category	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06
Total	385	690	1,080	1,338	1,733	2,089	2,427	2,748
Table 2a								

FY19

TAM Category	2018-07	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06
12 Month Homeless	1,415	1,513	1,603	1,754	1,838	1,764	1,764	1,789	1,786	1,761	1,779	1,759
Supportive Housing	151	155	158	174	185	165	176	184	190	197	190	185
Drug/Mental Health Crt	694	752	797	836	871	773	750	744	737	731	735	726
Jail or Prison	782	901	1,033	1,211	1,349	1,424	1,566	1,710	1,791	1,847	1,962	2,011
State Hospital/Civil Chrg	3	3	7	8	6	7	8	11	13	17	16	16
Total	3,045	3,324	3,598	3,983	4,249	4,133	4,264	4,438	4,517	4,553	4,682	4,697

Table 2b

#### *FY20*

TAM Category	2019-07	2019-08
12 Month Homeless	1,762	1,768
Supportive Housing	181	174
Drug/Mental Health Crt	717	708
Jail or Prison	2,051	2,088
State Hospital/Civil Chrg	14	12
6 Month Homeless	8	14
General Assistance	132	141
Total	4,865	4,905

Table 2c

## Notes:

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## **Targeted Adult Medicaid Reimbursements**

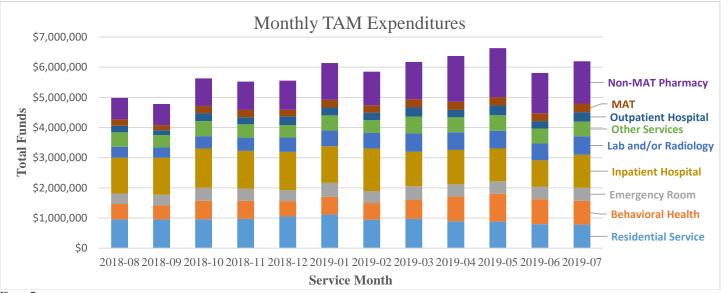


Figure 7

<b>Monthly Expendi</b>	tures (in	1,000s)					FY19					FY20	T-4-1
Service Type	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06	2019-07	Total
Residential Serv.	\$955	\$957	\$961	\$973	\$1,049	\$1,116	\$946	\$971	\$890	\$882	\$797	\$780	\$11,276
Behavioral Health	\$512	\$458	\$608	\$599	\$513	\$588	\$549	\$626	\$818	\$921	\$826	\$793	\$7,812
Emergency Room	\$349	\$357	\$436	\$402	\$366	\$461	\$398	\$456	\$410	\$417	\$418	\$432	\$4,901
Inpatient Hospital	\$1,185	\$1,229	\$1,302	\$1,250	\$1,269	\$1,215	\$1,405	\$1,148	\$1,142	\$1,083	\$875	\$1,095	\$14,196
Lab & Radiology	\$363	\$349	\$409	\$442	\$476	\$518	\$520	\$605	\$582	\$593	\$556	\$610	\$6,022
Other Services	\$477	\$402	\$496	\$440	\$407	\$507	\$425	\$555	\$496	\$514	\$495	\$484	\$5,699
Outpatient Hosp.	\$218	\$158	\$265	\$234	\$290	\$258	\$252	\$303	\$244	\$323	\$247	\$318	\$3,109
MAT	\$211	\$169	\$242	\$243	\$220	\$260	\$244	\$276	\$274	\$276	\$260	\$283	\$2,958
Non-MAT Pharm.	\$712	\$702	\$911	\$941	\$967	\$1,217	\$1,113	\$1,236	\$1,518	\$1,621	\$1,338	\$1,403	\$13,680
Grand Total	\$4,982	\$4,781	\$5,629	\$5,523	\$5,556	\$6,140	\$5,851	\$6,177	\$6,374	\$6,630	\$5,811	\$6,197	\$69,651

Table 3

Distinct Members	Served						FY19					FY20
Service Type	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06	2019-07
Residential Serv.	332	331	327	349	364	370	348	373	323	320	291	292
Behavioral Health	934	988	1,065	1,140	1,085	1,095	1,151	1,152	1,176	1,274	1,226	1,132
Emergency Room	444	446	517	512	467	575	491	520	526	506	551	559
Inpatient Hospital	124	94	113	101	104	118	115	104	114	107	107	108
Lab & Radiology	574	607	672	744	758	819	828	907	900	889	859	871
Other Services	3,194	3,468	3,817	4,122	3,978	4,093	4,254	4,363	4,438	4,558	4,581	4,717
Outpatient Hosp.	307	280	338	353	322	368	367	404	395	414	353	394
MAT	286	290	373	398	376	402	415	448	452	468	446	467
Non-MAT Pharm.	1,208	1,234	1,451	1,519	1,457	1,585	1,573	1,681	1,730	1,718	1,655	1,759
Grand Total	3,248	3,522	3,863	4,168	4,043	4,174	4,325	4,429	4,476	4,608	4,634	4,764

Table 4

- Monthly expenditures represent total fund payments to providers. Expenditures may not precisely sum up to total due to rounding.
- These total fund amounts consist of federal funds, state restricted funds, and hospital share.
- Pharmacy expenses shown here are subject to future reductions due to rebates.
- The months shown here represent the month of service, which is not necessarily the month of payment. They are subject to change with future billings and adjustments. Providers may bill up to one year after the date of service.

# **Expansion Parents Enrollment**

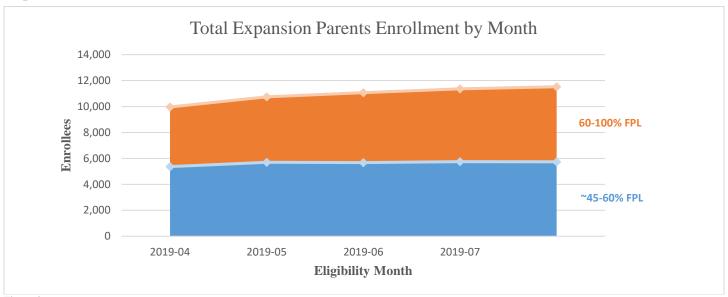


Figure 8

## **Expansion Parents Enrollment by Month**

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Category	2019-04	2019-05	2019-06	2019-07	2019-08
~45-60% FPL	4,590	5,010	5,325	5,403	5,780
60-100% FPL	5,364	5,688	5,630	5,611	5,744
Total	9,954	10,698	10,955	11,014	11,524

Table 5

## **Notes:**

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# **Expansion Parents Reimbursements**

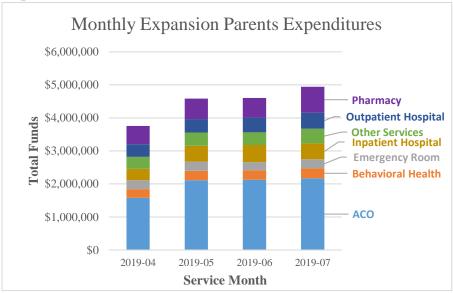


Figure 9

Monthly Expenditur	es (in thous	sands)	FY19	FY20	Total
Service Type	2019-04	2019-05	2019-06	2019-07	Total
ACO	\$1,580	\$2,112	\$2,128	\$2,173	\$7,994
Behavioral Health	\$260	\$287	\$287	\$299	\$1,133
Emergency Room	\$274	\$274	\$248	\$277	\$1,074
Inpatient Hospital	\$342	\$481	\$516	\$477	\$1,816
Other Services	\$364	\$402	\$384	\$448	\$1,598
Outpatient Hospital	\$382	\$405	\$445	\$486	\$1,717
Pharmacy	\$551	\$621	\$596	\$782	\$2,551
Grand Total	\$3,755	\$4,583	\$4,604	\$4,942	\$17,884

Table 6

Distinct Members Se	rved	FY19		FY20
Service Type	2019-04	2019-05	2019-06	2019-07
ACO	3,147	4,271	4,314	4,402
Behavioral Health	5,430	5,785	5,768	5,852
Emergency Room	310	315	332	331
Inpatient Hospital	52	53	62	47
Other Services	1,434	1,463	1,449	1,523
Outpatient Hospital	520	543	573	570
Pharmacy	2,620	2,750	2,548	2,803
Grand Total	7,116	7,687	7,657	7,873

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# Expansion Adults without Dependent Children Enrollment

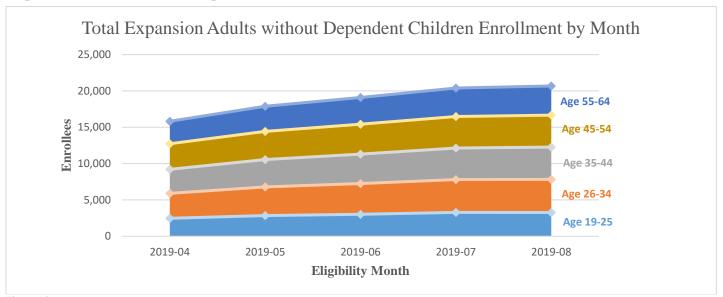


Figure 10

## Expansion Adults without Dependent Children Enrollment by Month

Category	2019-04	2019-05	2019-06	2019-07	2019-08
Age 55-64	3,091	3,466	3,682	3,918	4,018
Age 45-54	3,523	3,875	4,116	4,344	4,396
Age 35-44	3,311	3,757	4,056	4,351	4,450
Age 26-34	3,431	3,945	4,219	4,514	4,547
Age 19-25	2,473	2,852	3,031	3,283	3,276
Total	15,829	17,895	19,104	20,410	20,687

Table 8

#### **Notes:**

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## Expansion Adults without Dependent Children Reimbursements

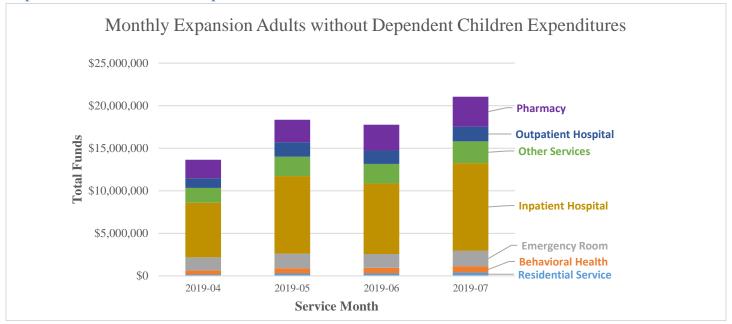


Figure 11

Monthly Expenditur	es (in thous	sands) F	Y19	FY20	То4о1
Service Type	2019-04	2019-05	2019-06	2019-07	Total
Behavioral Health	\$484	\$624	\$686	\$750	\$2,544
Emergency Room	\$1,531	\$1,708	\$1,602	\$1,819	\$6,660
Inpatient Hospital	\$6,407	\$9,115	\$8,306	\$10,302	\$34,130
Other Services	\$1,748	\$2,279	\$2,289	\$2,547	\$8,863
Outpatient Hospital	\$1,130	\$1,713	\$1,569	\$1,743	\$6,156
Pharmacy	\$2,174	\$2,631	\$3,033	\$3,508	\$11,347
Residential Service	\$164	\$277	\$278	\$387	\$1,106
Grand Total	\$13,638	\$18,348	\$17,764	\$21,054	\$70,804

Table 9

Distinct Members Se	rved		FY19	FY20
Service Type	2019-04	2019-05	2019-06	2019-07
Behavioral Health	1,028	1,337	1,562	1,452
Emergency Room	1,822	2,036	2,051	2,253
Inpatient Hospital	613	714	668	690
Other Services	14,465	16,456	17,701	18,963
Outpatient Hospital	1,529	1,964	1,981	2,189
Pharmacy	5,504	6,592	6,810	7,566
Residential Service	72	110	123	151
Grand Total	15,105	17,105	18,296	19,580

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